

# CANDIDATE DECLARATION

## CANDIDATE FILING INFORMATION

**The filing period** is the first Monday in June through the following Friday for all offices.

**Filings made by mail** may be submitted up to ten business days prior to the first day for candidates to file. All filings, whether in person or by mail, must be **received** by the filing officer not later than the close of business on the last day of the filing period. Filings received after this date, **regardless of the postmark**, are invalid.

**Filings made in person** must be made during normal business hours. If the office sought is federal, statewide, or encompasses more than one county for a federal or state office, the filing is made with the Secretary of State. If the office sought is for a single county legislative, Court of Appeals, or superior court race, the filing may be made with either the County Auditor or the Secretary of State. All other offices are filed with the County Auditor (in King County with the Records, Elections and Licensing Services Division). Offices eligible to file with the Office of the Secretary of State may file online at [www.secstate.wa.gov](http://www.secstate.wa.gov) beginning at 9:00 a.m. the first Monday in June and ending at 4:00 p.m. the following Friday.

**A filing fee** of \$10 is required for all offices with a fixed annual salary of \$1,000 or less. A filing fee equal to 1% of the salary is required for offices with a fixed annual salary of more than \$1,000. The fee is based on the salary in effect at the time of filing. No filing fee is required for offices that have no fixed annual salary. Filing fees are not refundable.

**A filing fee petition** containing signatures of registered voters equal to the dollar amount of the filing fee is permitted for those candidates **without sufficient assets or income** to pay the filing fee.

**Withdrawals** may be made through the Thursday following filing week. AFTER THAT DATE YOUR NAME MAY BE REMOVED FROM THE BALLOT ONLY BY JUDICIAL ACTION.

Note: Once filed, your Declaration of Candidacy may not be altered or amended. Should you decide during the filing period that you wish to change any part of the Declaration, you will be required to withdraw and re-file. This would also entail a second filing fee or filing fee petition, if applicable.

## PUBLIC DISCLOSURE INFORMATION

IF THE JURISDICTION IN WHICH YOU ARE RUNNING HAD AS OF THE LAST GENERAL ELECTION:	PUBLIC DISCLOSURE REPORTS REQUIRED
Fewer than 1,000 registered voters and you do not receive or expect to receive contributions of \$5,000 or more in the aggregate*	None*
1,000-4,999 registered voters, area less than entire county, and you do not receive or expect to receive contributions of \$5,000 or more in the aggregate*	Financial Affairs Statement (Form F-1)*
5,000 or more registered voters or County-Wide or larger area	Financial Affairs Statement (Form F-1) and Campaign Finance Reports ("C" series forms)
*Any candidate who receives or expects to receive contributions of \$5,000 or more in the aggregate	Financial Affairs Statement (Form F-1) and Campaign Finance Reports ("C" series forms)

**Exempt from state public disclosure reporting are candidates for U.S. Senate, U.S. Representative, precinct committee officer, cemetery districts, and districts where voters must have special qualifications such as the ownership of land. Check with the county elections department regarding these offices.**

**INITIAL PUBLIC DISCLOSURE REPORTS MUST BE FILED WITHIN TWO WEEKS OF BECOMING A CANDIDATE**

## INSTRUCTIONS FOR COMPLETING FORM

### PLEASE READ CAREFULLY BEFORE COMPLETING DECLARATION OF CANDIDACY

**Line 1. Print** your name as you are registered to vote.

**Line 2. Print** the address at which you are registered to vote. Specify your mailing address if it is different from the street address given. You are **not** required to provide your telephone number or email address, but it is recommended that you do. If you include your telephone number and email address, it will be made available to the public. Each candidate is responsible for ensuring that he or she meets **all** the qualifications for the office sought **at the time he or she files**.

**Line 3. Print** the name of the office for which you are a candidate. For example, "State Representative...22nd District ...Position 1" or "City Councilman...Olympia...Position 4." You should check **prior** to the filing period to be sure that you know for which offices you are entitled to file. The responsibility for filing for the correct office is yours.

**Line 4.** Check the appropriate box.

**Line 5.** Check the appropriate boxes. If the office for which you are filing is partisan and you are filing as a minor party or independent candidate, you must comply with the provisions of RCW 29A.24. The filing officer will determine if abbreviation of the party name is necessary.

**Line 6.** Check the appropriate box. If you assert that you are without sufficient assets or income to pay the filing fee, you must accompany the Declaration of Candidacy with a filing fee petition as described by RCW 29A.24.101.

**Line 7.** Print your name as you wish it to appear on the ballot. Nicknames are acceptable. Titles denoting past or present occupation, including military rank, are not permitted and will not be included.

**Line 8.** Read the oath. You should then sign the Declaration of Candidacy only in the presence of a notary public or the officer with whom the declaration is filed.

**FILING DATA . . . FOR OFFICE USE ONLY**

Date _____	Fee Paid \$ _____	File No. _____	Office Code _____
<input type="checkbox"/> Check	<input type="checkbox"/> Debit/Credit	Voter Registration # _____ Clerk Initials _____	
<input type="checkbox"/> Cash	<input type="checkbox"/> Filing Fee Petition		

## DECLARATION OF CANDIDACY

1. I, \_\_\_\_\_ am a registered voter residing at:  
(PRINT NAME AS YOU ARE REGISTERED TO VOTE)

2. \_\_\_\_\_  
(STREET ADDRESS OR RURAL ROUTE) (CITY) (COUNTY) (ZIP CODE)

\_\_\_\_\_ (MAILING ADDRESS) (CITY) (COUNTY) (ZIP CODE)

\_\_\_\_\_ (TELEPHONE NUMBER) (EMAIL ADDRESS)

and **at the time of filing this declaration** I am legally qualified to assume office if elected.

3. I declare myself as a candidate for the office of:

\_\_\_\_\_ (NAME OF OFFICE)

\_\_\_\_\_ (CONGRESSIONAL OR LEGISLATIVE DISTRICT, COUNTY, CITY, OR OTHER JURISDICTION)

\_\_\_\_\_ (POSITION NUMBER IF APPLICABLE) (DIRECTOR OR COMMISSIONER DISTRICT, IF ANY)

4. For the following term of office:

- ☐ A full term, or a full term and a short term, or
- ☐ An unexpired term

5. This office is:

- ☐ Nonpartisan, or
- ☐ Partisan, and I am (check one): ☐ a candidate of the \_\_\_\_\_ party, or
- ☐ an independent candidate.

6. Filing Fee (check one):

- ☐ There is no filing fee because the office has no fixed annual salary, or
- ☐ I am submitting a filing fee of \$10 because the fixed annual salary of the office is \$1,000 or less, or
- ☐ I am submitting a filing fee of \$\_\_\_\_\_, an amount equal to 1% of the annual salary, or
- ☐ I am without sufficient assets or income to pay the filing fee required by law and I have attached a filing fee petition in lieu of this fee, pursuant to RCW 29A.24.091.

7. Please print my name on the ballot **exactly** as follows: \_\_\_\_\_  
(PLEASE PRINT)

I declare that this information is, to the best of my knowledge, true. I also swear, or affirm, that I will support the Constitution and laws of the United States and the Constitution and laws of the State of Washington.

*Note: Your signature must be personally attested to either by a notary public or by the officer with whom the declaration is filed.*

**8. Sign Here X** \_\_\_\_\_

(SIGNATURE OF CANDIDATE AS REGISTERED TO VOTE)

STATE OF WASHINGTON, COUNTY OF \_\_\_\_\_

**SIGNED OR ATTESTED BEFORE ME ON** \_\_\_\_\_  
(DATE)

by \_\_\_\_\_  
(CANDIDATE)

\_\_\_\_\_  
(SIGNATURE OF NOTARY)

\_\_\_\_\_  
(TITLE)

MY APPOINTMENT EXPIRES \_\_\_\_\_

(SEAL OR STAMP)